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WASHINGTON, DC 20005						(Depositor's name)				
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APPLICATION NO.	ATION NO. FILING DATE			FIRST NAME	D INVEN	TOR	ATTORNEY DOC		CONFIRMATION NO.	
10/766,019 TITLE OF INVENTION:	01/29. OPTICAL WAV		TICAL DEVICE,	Masaki S AND METH				.1049 .VEGUIDE	2669	
APPLN. TYPE	SMALL	ENTITY	ISSUE FEE		PU	JBLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	_
nonprovisional	N	0	\$1400			\$300	\$1700		05/24/2006	_
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PENG, CHARLIE YU			2883			385-090000	_			
Change of correspondence address or indication of "Fee Addre CFR 1.363).      Change of correspondence address (or Change of Correspondence address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cunnumber is required.				2. For printing on the patent front page, him (1) the names of up to 3 registered patent or agents OR, alternatively,  (2) the name of a single firm (having as a registered attorney or agent) and the name 2 registered patent attorneys or agents. If listed, no name will be printed.			a member a nes of up to	STAAS 2 3	& HALSEY L	<u></u>
3. ASSIGNEE NAME AN										Ţ
PLEASE NOTE: Unle recordation as set forth	ss an assignee is in 37 CFR 3.11.	identified be Completion of	low, no assignee of this form is NO	data will app T a substitute	ear on t for filin	he patent. If an assig g an assignment.	nee is identifie	d below, the d	document has been filed	fo
(A) NAME OF ASSIGNEE				(B) RESIDENCE: (CITY and STA4/10/2006/UNEXENEZ 00000008 10766019						
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Please check the appropria	ite assignee categ	gory or categor	ries (will not be pr	inted on the p	atent):	Individual 🚨	Corporation or o	ther private gr	oup entity Governme	ent
4a. The following fee(s) are enclosed:  Itssue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies  5. Change in Entity Status (from status indicated above)				Ab. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
<ol> <li>Change in Entity Statt</li> </ol>	is (irom status in	dicated above	)							

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Authorized Signature

PAUL I. KRAVETZ

Registration No. 35,230

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.